		identify your case	_			
Debtor 1	Ronald First Name	Eugene Middle Name	Carson  Last Name		Check if this is:	
Debtor 2	Robin	Rene	Carson			
(Spouse, if filing)	First Name	Middle Name	Last Name	'		
United States Bank	kruptcy Cour	for the: MIDDLE DI	ST. OF PENNSYLVAN	IIA [	A supplement show	wing postpetition as of the following da
Case number	1:20-bk-	02771			chapter to income	as of the following de
(if known)					MM / DD / YYYY	<del></del>
fficial Form 1	<u>06I</u>					
chedule I: Yo	our Inco	me				12/
clude information a out your spouse. ur name and case	about your s If more spac number (if k	pouse. If you are sepa ce is needed, attach a s known). Answer every	re married and not filing arated and your spouse separate sheet to this fo question.	is not filing wit	h you, do not include	information
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clude information a out your spouse. ur name and case  Part 1: Description Description of the case of	about your s If more space number (if k ribe Emple loyment than one arate page about yers. , seasonal,	pouse. If you are sepa te is needed, attach a s known). Answer every cyment	Debtor 1  Employed  Not employed	is not filing wit	Debtor 2 or non	information es, write  -filing spouse
clude information a out your spouse. ur name and case Part 1: Desci Fill in your emplinformation. If you have more job, attach a sepawith information additional employ Include part-time or self-employed Occupation may	about your s If more space number (if k ribe Emple loyment than one arate page about yers. , seasonal, work. include	pouse. If you are sepa te is needed, attach a s known). Answer every cyment  Employment status  Occupation	Debtor 1  Employed  Not employed  Disabled Vet	is not filing wit	Debtor 2 or non- Employed Not employed Finance FiServ (HQ)	information es, write  -filing spouse
clude information a out your spouse. ur name and case  Part 1: Description Description Percentage of the percentage of t	about your s If more space number (if k ribe Emple loyment than one arate page about yers. , seasonal, work. include	pouse. If you are sepace is needed, attach a strown). Answer every byment  Employment status  Occupation  Employer's name	Debtor 1  Employed  Not employed	is not filing wit	Debtor 2 or non-  Employed  Not employed  Finance  FiServ (HQ)	information es, write  -filing spouse
clude information a out your spouse. ur name and case Part 1: Desci Fill in your emplinformation.  If you have more job, attach a sepawith information additional employ Include part-time or self-employed  Occupation may student or homer	about your s If more space number (if k ribe Emple loyment than one arate page about yers. , seasonal, work. include	pouse. If you are sepace is needed, attach a strown). Answer every byment  Employment status  Occupation  Employer's name	Debtor 1  Employed  Not employed  Disabled Vet	is not filing wit	Debtor 2 or non- Employed Not employed Finance FiServ (HQ)	information es, write  -filing spouse
clude information a out your spouse. ur name and case Part 1: Desci Fill in your emplinformation.  If you have more job, attach a sepawith information additional employ Include part-time or self-employed  Occupation may student or homer	about your s If more space number (if k ribe Emple loyment than one arate page about yers. , seasonal, work. include	pouse. If you are sepace is needed, attach a strown). Answer every byment  Employment status  Occupation  Employer's name	Debtor 1  Employed  Not employed  Disabled Vet	is not filing wit	Debtor 2 or non- Employed Not employed Finance FiServ (HQ)	information es, write  -filing spouse
clude information a out your spouse. ur name and case Part 1: Desci Fill in your emplinformation.  If you have more job, attach a sepawith information additional employ Include part-time or self-employed  Occupation may student or homer	about your s If more space number (if k ribe Emple loyment than one arate page about yers. , seasonal, work. include	pouse. If you are sepace is needed, attach a strown). Answer every byment  Employment status  Occupation  Employer's name	Debtor 1  Employed  Not employed  Disabled Vet	is not filing wit	Debtor 2 or non- Employed Not employed Finance FiServ (HQ)	information es, write  -filing spouse

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

			For Debtor 1		For Debtor 2 or non-filing spouse	
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.		\$0.00	<u>\$5,563.15</u>	
3.	Estimate and list monthly overtime pay.	3. •	+	\$0.00	\$0.00	
4.	Calculate gross income. Add line 2 + line 3.	4.		\$0.00	\$5,563.15	

Debtor 2 **Robin Rene Carson** Case number (if known) 1:20-bk-02771 For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here ..... \$0.00 \$5,563.15 List all payroll deductions: \$919.43 5a. Tax, Medicare, and Social Security deductions 5a. \$0.00 5b. Mandatory contributions for retirement plans 5b \$0.00 \$0.00 \$0.00 \$433.29 5c. Voluntary contributions for retirement plans 5c. \$0.00 \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 \$88.88 5e 5e. Insurance \$0.00 \$0.00 5f. Domestic support obligations 5f. \$0.00 \$0.00 5g. Union dues 5g. 5h. Other deductions. \$0.00 \$67.21 5h + Specify: See continuation sheet Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 6 \$0.00 \$1,508.81 5g + 5h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. \$0.00 \$4,054.34 List all other income regularly received: 8a. Net income from rental property and from operating a \$0.00 \$0.00 business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8b. \$0.00 \$0.00 8c. Family support payments that you, a non-filing spouse, or a \$0.00 \$0.00 dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$0.00 \$0.00 8e. Social Security 8e. \$1,437.00 \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any noncash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. Specify: \$0.00 \$0.00 8g. Pension or retirement income 8g. \$0.00 \$0.00 8h. Other monthly income. 8h.+ Specify: VA Disability \$3,946.25 \$0.00 Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. \$0.00 \$5,383.25 10. Calculate monthly income. Add line 7 + line 9. \$5,383.25 \$4,054.34 \$9,437.59 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. \$0.00 Specify: 11. 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly 12. \$9,437.59 income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, Combined if it applies. monthly income 13. Do you expect an increase or decrease within the year after you file this form? **✓** No. None. Yes. Explain:

Case number (if known) 1:20-bk-02771

5h.	Other Payroll Deductions (details)		For Debtor 1	For Debtor 2 or non-filing spouse
	City			\$54.73
	AD&D			\$1.47
	LTD			\$11.01
		Totals:	\$0.00	\$67.21

Fill in this inforn		inny your case.			Check	if this is:		
Debtor 1	Ronald First Name	Eugene Middle Name	Cars Last Na		An amended filing  A supplement showing chapter 13 expenses as following date:		naatnatition	
Debtor 2 (Spouse, if filing)	Robin First Name	Rene Middle Name	Cars Last Na					
United States Bank					<u>-</u>			_
Case number (if known)	1:20-bk-0277		OI I LINIX		M	M / DD / Y	YYY	
fficial Form 10	D6J							
chedule J: Yo	our Expens	ses						<b>12</b> /
orrect information. I	If more space is er (if known). A	ible. If two married p needed, attach anoth nswer every question	er sheet to			-	-	
Part 1: Descr	ibe Your Hou	sehold						
Is this a joint cas	se?							
_ ✓ No	Debtor 2 live in a	separate household?		s for Separate House	ehold of De	ebtor 2.		
Do you have dep		No		·				
Do not list Debtor Debtor 2.	1 and	Yes. Fill out this in for each dependent				age	endent's	Does depended live with you?
Do not state the d names.	lependents'			<u>Daughter</u>		<u>19</u> 		Yes No Yes No Yes No Yes Yes
Do your expense expenses of peo yourself and you	ple other than	☑ No □ Yes						No Yes No Yes Yes
Part 2: Estim	ate Your Ong	oing Monthly Exp	enses					
•	s of a date after t	ankruptcy filing date u he bankruptcy is filed e.	-	-			-	
		ash government assis on Schedule I: Your I	-			<u>Y</u> 0	our expens	es
		kpenses for your residence any rent for the grou				4.		\$775.9
If not included in	line 4:							
4a. Real estate t	axes					4a.		
4b. Property, hor	meowner's, or ren	iter's insurance				4b.		\$71.0
4c. Home mainte	enance, repair, ar	nd upkeep expenses				4c.		\$100.0
4-1		ondominium duos				44		\$100.0

Case number (if known) <u>1:20-bk-02771</u>

		Your expe	nses
5.	Additional mortgage payments for your residence, such as home equity loans	5	
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a	\$250.00
	6b. Water, sewer, garbage collection	6b	\$96.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c	\$726.00
	6d. Other. Specify:	6d	
7.	Food and housekeeping supplies	7.	\$800.00
8.	Childcare and children's education costs	8.	
9.	Clothing, laundry, and dry cleaning	9.	\$50.00
10.	Personal care products and services	10.	\$50.00
11.	Medical and dental expenses	11	\$150.00
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$500.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$100.00
14.	Charitable contributions and religious donations	14.	
15.	Insurance.		
	Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a	\$220.00
	15b. Health insurance	15b	
	15c. Vehicle insurance	15c	\$175.00
40	15d. Other insurance. Specify: Supplemental Champ VA Health  Taylor - Do not include to use deducted from your new as included in lines 4 or 20.	15d	\$104.00
10.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:	16	
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1 <b>2017 Kia Sportage</b>	17a	\$550.00
	17b. Car payments for Vehicle 2 <b>2017 Chevy Cruze</b>	17b	\$425.57
	17c. Other. Specify: Social Security not devoted to plan	17c	\$1,437.00
	17d. Other. Specify: VA Disability not devoted to plan	17d	\$1,239.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	
19.	Other payments you make to support others who do not live with you.  Specify:	19.	
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
	20a. Mortgages on other property	20a	
	20b. Real estate taxes	20b	
	20c. Property, homeowner's, or renter's insurance	20c.	
	20d. Maintenance, repair, and upkeep expenses	20d	
	20e. Homeowner's association or condominium dues	20e	

Debtor 1 Debtor 2		Ronald Eugene Carson Robin Rene Carson	Case number (if known)	1:20-bk-02771					
21.	Other.	Specify:	21. <b>+</b> _						
22.	Calcul	late your monthly expenses.	_						
	22a.	Add lines 4 through 21.	22a	\$7,919.53					
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b						
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c	\$7,919.53					
23.	Calcul	late your monthly net income.							
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a	\$9,437.59					
	23b.	Copy your monthly expenses from line 22c above.	23b. <b>–</b> _	\$7,919.53					
		Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c	\$1,518.06					
24.	Do you	expect an increase or decrease in your expenses within the year after you file this form?							
		ample, do you expect to finish paying for your car loan within the year or do you ex ent to increase or decrease because of a modification to the terms of your mortgage	. ,						
	□ No	lo. res. Explain here: Old lease @ \$828.35 finished. New car purchased @ \$550 in its pla	ace.						